

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107223

FILED
Mar 09, 2004
Secretary of State

Entity Name: A. S. PAINTING INC

Current Principal Place of Business:

4432 BRODEL AVE.
NORTH PORT, FL 34286 US

New Principal Place of Business:

471 BLACKBURN ST.
ENGLEWOOD, FL 34223 US

Current Mailing Address:

4432 BRODEL AVE.
NORTH PORT, FL 34286 US

New Mailing Address:

471 BLACKBURN ST.
ENGLEWOOD, FL 34223 US

FEI Number: 20-0275526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBS, SETH D
4432 BRODEL AVE.
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

WALL, AARON L
471 BLACKBURN ST.
ENGLEWOOD, FL 34223 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: AARON WALL

03/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GIBBS, SETH D
Address: 4432 BRODEL AVE.
City-St-Zip: NORTH PORT, FL 34286 US

Title: VP (X) Delete
Name: WALL, AARON L
Address: 471 BLACKBURN ST.
City-St-Zip: ENGLEWOOD, FL 34223 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WALL, AARON L
Address: 471 BLACKBURN ST.
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON WALL

P

03/09/2004

Electronic Signature of Signing Officer or Director

Date